

PART B - FEE(S) TRANSMITTAL

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SEP 26 2006

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7590

09/08/2006

AGILENT TECHNOLOGIES, INC.
 Legal Department, DL429
 Intellectual Property Administration
 P.O. Box 7599
 Loveland, CO 80537-0599

09/27/2006 RHEBRAH1 00000033 501078 10777665

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Ann Marie Radcliffe

(Depositor's name)

Ann Marie Radcliffe

(Signature)

Sept. 26, 2006

(Date)

01 FC:1501 1400.00 DA

02 FC:1504 300.00 DA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

10/777,665

02/13/2004

Robert C. Henderson

10030965-1

5644

TITLE OF INVENTION: METHOD AND SYSTEM FOR SUB-AMBIENT PRESSURE CONTROL FOR COLUMN HEAD PRESSURE IN GAS CHROMATOGRAPHY SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/08/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
HOPKINS, ROBERT A	1724	095-082000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Agilent Technologies, Inc.

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
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- ☐ A check is enclosed.
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☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1078 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Thomas X. Li

Date

9/26/06

Typed or printed name

Thomas X. Li

Registration No. 37,079

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